ISSUE SLIP STAPLE AREA (for additional cross references)

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POSITION		INITIALS	ID NO.	DATE 🔻
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FEE DETERMINATION		<i>S</i> U	75316	10/19/00
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FORMALITY REVIEW		6Y82	66793	01/23/6)
RESPONSE FORMALIT	Y REVIEW	CM	71632	5/9/01

## INDEX OF CLAIMS

.,	Rejected	N	Non-elected
		1	Interference
	Allowed		Appeal
_	(Through numeral) Canceled		
÷	Restricted	0	Objected

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	63		113	
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15 N	66	<del>                                      </del>	116	
18 N		<del> - - - - - - </del>	117	
17 V V	67	<del>                                     </del>	118	
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19 V /	69	<del>                                      </del>	<del> </del>	+
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28	79		129	
29	80	<del>- - - - - - - - - - - - - - - - - - - </del>	130	
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44	95	<del>╶┤╶┤╶┤</del> ╶┼╌┼╌┤	145	
45		<del>╶┨┈╏┈╏┈╏</del> ╌╂╌╂╌┤	146	
46	96	╼╁╼╁╌╂╌╂╌╂╌┼╌┤	147	
47	97	╼┾╌┼╌┼╌┼╌┼╌┼	148	-+
48	98	<del></del>	149	-+-+-+
49	99	<del>╶╎╺╎┈╎┈┤╸┤╸┤╸┤</del>	150	
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If more than 150 claims or 10 actions staple additional sheet here